

carē

Comprehensive Health Insurance



www.religarehealthinsurance.com

 **RELIGĀRE** | Health Insurance
Values that bind

Ab Health Hamesha

Don't worry, be happy

What makes you happy?

A walk in the park with a loved one? A spectacular sunset? An afternoon with your parents? Dropping your kids off to school or watching them play?

Or do you more look forward to

Moving from one city to another, closing business deals?

Driving that top-of-the-line sports model?

A weekend filled with adventure sports?

Whether you prefer taking it easy or opt for that adrenalin rush, we understand that your happiness is based on being comfortable with your state of health. And your happiness is our concern.

Our philosophy

Life's uncertainties are inevitable. And that's the case with health too. No one can assure you that you will always be in the pink of health.

We can, however, assure you that while you are unwell, we'll take up all the hassles related to your treatment. So you can be totally worry-free. We will provide you access to the best healthcare facilities to put you back on the road to recovery, without a care about medical bills and other related expenses. In other words, we will take the worry out of your recuperation.

With us as your health insurer, it is truly *Ab Health Hamesha !*



carē - No more worrying about your loved ones

We understand that hospital bills and other related expenses can become a burden when your main concern should be getting well or nursing a loved one back to health.

So we want to get those bills out of your way with our simple plans that take care of your expenses. Your only concern should be getting back your health and happiness.

carē Advantage

In addition to hassle-free claims, we believe you deserve distinct benefits for choosing carē, and they come your way in the form of certain thoughtfully designed product & service features:

- ✓ Wide range of sum insured - upto ₹ 60 Lacs
- ✓ Annual health check-up for insured members - regardless of claims history
- ✓ Get automatic recharge of sum insured if claim amount exhausts your coverage, at no extra cost
- ✓ No upper-limit age on any of our plans
- ✓ Daily allowance to meet incidental expenses
- ✓ Avail medical treatment anywhere in the world
- ✓ Increase sum insured of your existing policy, at your convenience
- ✓ Ease of cashless treatment & settlement of claims directly by the company

carē Highlights

- In-patient Care
- Pre & Post hospitalisation
- Organ Donor Cover
- No Claim Bonus
- Floater Cover
- Day Care Treatment
- Lifelong Renewability
- Second Opinion
- Domiciliary hospitalisation
- Ambulance Cover
- Health Check-up
- Tax Benefit

carē is

SIMPLE

COMPREHENSIVE

REWARDING

FLEXIBLE

and MORE



Simple and convenient to manage

We believe in the power of simplicity. Accordingly, 'carē' is a straightforward plan designed to offer maximum convenience.

One for all and all for one

You no longer need to manage individual health insurance plans for your family members. Under the 'floater' plan, you can cover any member of your immediate family (yourself or spouse, parents and children) for the sum insured in a single policy.

Longer policy term

The security of your health and resultant happiness should be your prerogative for life. To make the process of renewing your health insurance more convenient, choose a policy with a term of one, two or three years. What's more! Avail a discount on your premium if you opt for a longer policy term.

Zero payment treatment

With cashless hospitalisation, you no longer need to run around paying off hospital bills and then following up for a reimbursement. All you now need to do is get admitted to any of our network hospitals and concentrate only on your recovery. Relieve yourself from the worry of arranging for the funds. Leave the bill payment arrangements to us.

File your claims directly with us

We believe in the old adage, "The proof of the pudding is in the eating." So we back up our promise with an enduringly simple claims procedure, which involves just you and us.

- Either in the case of an emergency or a planned hospitalisation, all you have to do is present the Religare Health Card at our network of more than 2400 leading hospitals pan India and avail cashless service.
- In case of reimbursement of expenses when you use a non-networked hospital, all you need to do is notify us immediately about the claim. Call us directly, send us the specified documents and we'll process your claim.

Since you interact directly with us, we can be doubly sure that you are satisfied. And when you are satisfied, we feel satisfied too.

We deliver on our promises. We take pride in offering hassle-free clearance and speedy settlements.

Comprehensive, from A to Z

We understand that the meter starts ticking not from the time of hospitalisation, but from the time of diagnosis. And continues beyond your discharge from the hospital, encompassing various expenses.



Your treatment

Hospitalisation for at least 24 hours

If you are admitted to a hospital for in-patient care, for a minimum period of 24 consecutive hours, we pay for - room charges, nursing expenses and intensive care unit charges to surgeon's fee, doctor's fee, anaesthesia, blood, oxygen, operation theater charges, etc.

Hospitalisation for less than 24 hours

We also pay for your medical expenses if you undergo a day care treatment at a hospital that requires hospitalisation for less than 24 hours - we cover a comprehensive range of day care treatments.

Treatment at home

Despite suffering from an illness/disease/injury (which would normally require care and treatment at a hospital), hospitalisation may not be possible - perhaps your state of health is such that you are in no condition to be moved to a hospital, or a room may not be available. Don't worry, we understand that and are happy to let you know that under 'Domiciliary hospitalisation', we will reimburse the medical expenses incurred by you during your treatment at home, as long as it involves medical treatment for a period exceeding 3 days and had actually merited hospitalisation.

Pre-hospitalisation

- **Examination, tests and medication** - Sometimes the procedures that finally lead you to hospital, such as investigative tests and medication, can be quite financially draining. We cover the medical expenses incurred by you before your hospitalisation.
- **Getting to the hospital** - It is our utmost concern that you get the medical attention you require as soon as possible, especially in an emergency. We will reimburse you for expenses that you incur on an ambulance service offered by the hospital or any service provider, in an emergency situation.

Post-hospitalisation

- **Back home and till you are back on your feet** - The expenses don't end once you are discharged. There are bound to be follow-up visits to your medical practitioner, medication that is required and sometimes even further confirmatory tests. We also cover the medical expenses incurred by you after your hospitalisation.

Coverage for non-medical expenses

- **It all adds up** - A trip to a hospital involves more than merely using the doctor's services and hospital facilities. You are bound to run up numerous 'non-medical' expenses such as transportation, attendant's cost and other daily expenses that you may not be able to even foresee. We would like to reimburse those out-of-pocket expenses too. To meet these expenses without a bother and as suits you best, we pay - Daily Allowance - a lump sum per day for each day of hospitalisation.



We reward you

Health check-up – regardless of claim history

Our concern is your good health. To pre-empt your ever having to visit a hospital, we provide an annual health check-up for yourself and adult members of your family covered by the policy.

Increase your sum insured

As life progresses, our needs and responsibilities constantly undergo change. What is sufficient today may seem insufficient tomorrow; and similar could be the case with your health insurance coverage.

We believe that we have to ensure your health hamesha, whatever be your requirements. And so, should you ever feel the need to increase your sum insured, we offer you the option of doing so, keeping all the other features and benefits of your policy intact.

No claim bonus

If you do not have any occasion to claim health insurance in a particular year, we raise a cheer to your good health in the form of a bonus for you. You receive an increase of 10 per cent in your sum insured during the next year. And for every year that you enjoy un-interrupted good health, your bonus keeps building up, up to 50% of your sum insured! It's just our way to tell you that we're there with you in good times and in bad.

Reduce your tax liability

Opting for health insurance is certainly a step in the right direction, and it comes with a two-fold benefit. Not only does it ensure that you and your family can access good medical care at all times, it also enables you to avail of a tax benefit on the premiums you pay towards your health insurance, as per prevailing tax laws of the Income Tax Act, 1961 (u/s 80D).

Flexible to your needs

A friend in need is a friend indeed. And we take pride in being there for you at every step, whatever may be your changing requirements. Should you wish to join our family midway into your existing policy or review your policy purchase decision - we have an array of solutions for you to choose from, to best suit your changing needs. No longer will change be an impediment to health.

Come join in anytime

Be a part of the Religare family and continue to get uninterrupted coverage with no compromises at all. Get quality service, enhanced product features and even a reduction in waiting period by the number of years of continuous coverage under a similar plan with your previous insurer.

Avail the treatment of your choice

We believe that you should be free to decide how to spend your health insurance cover towards getting the best possible medical care. As far as we're concerned, it is your money. So our plans come without any cap on vital expenses like doctor/surgery fees, operation theater & allied charges, to name a few.

Review your decision

We have your best interests at heart and at the same time recognise that you know your needs best. Hence, after purchasing the policy, if you find it unsuitable, you can cancel and return the policy to us. Our policies come with a free-look period of 15 days.

Care anywhere

Our care knows no boundaries; literally. So, while we ensure you have access to the best healthcare services, we leave it to your discretion whether you would wish to avail certain specialised treatments in India or abroad. After all, it's your health, and we stand by every decision you take in its interest.

carē and more

We are committed to your healthcare needs. Your total well-being is our concern. So we go that extra mile for you.

Recharge your policy

A Refill is always welcome! So your sum insured is reinstated just when you need it the most. If, due to claims made, you ever run out of/exhaust your health cover, we reinstate the entire sum insured of your policy, which can be used for any future claims that are unrelated to the claim made during the same year. Our care knows no limits; we are there for you, hamesha!

Organ donor cover

We care about those who help you as much as we care for you. So, beyond ensuring that your medical needs are met, we will reimburse you for medical expenses that are incurred by an organ donor while undergoing the organ transplant surgery.

You're entitled to a second opinion

We take your illness as seriously as you do. If you are suffering from a serious illness and feel uncertain about your diagnosis or wish to get a second opinion of an expert/doctor, we arrange one for you, free of cost.



Plan Options

Features (Sum Insured ₹)	2 Lac, 3 Lac, 4 Lac	5 Lac, 7 Lac, 10 Lac
Pre-hospitalisation	30 days	30 days
Post-hospitalisation	60 days	60 days
Day Care Treatments	Yes	Yes
Room Rent	1% of SI per day	Single Private Room
ICU Charges	2% of SI per day	No Limit
Doctor's Fee etc.	No Limit	No Limit
Other Medical Charges	No Limit	No Limit
Daily Allowance	₹500 per day upto 5 days	-
Ambulance Cover	₹1,500 per claim	₹2,000 per claim
Domiciliary hospitalisation	Up to 10% of SI	Up to 10% of SI
Organ Donor Cover	₹50,000	₹1,00,000
Annual Health Check-up	Yes	Yes
Second Opinion	-	Yes
No Claim Bonus	Yes	Yes
Recharge of Sum Insured	Up to Sum Insured	Up to Sum Insured
Care Anywhere	-	-

Medical Check-up

We would like you to undergo certain medical tests (as per the corresponding grid) that will enable us to get a better understanding of your current and future health needs, and help us in ensuring your sustained good health.

Cost of Medical Check-up -

- The cost of the medical test will be borne by Us in case the policy is opted for 2 or 3 years.
- If the policy is opted for 1 year and the proposal is accepted, we shall reimburse at least 50% of the cost incurred towards Medical Check-up.
- If your proposal is rejected, or policy cancelled during the free-look period, the cost of medical tests will be deducted from the refundable premium.

15 Lac, 20 Lac, 25 Lac	50 Lac, 60 Lac
30 days	30 days
60 days	60 days
Yes	Yes
Single Private Room, upgradable to next level	Single Private Room, upgradable to next level
No Limit	No Limit
No Limit	No Limit
No Limit	No Limit
-	-
₹2,500 per claim	₹3,000 per claim
Up to 10% of SI	Up to 10% of SI
₹2,00,000	₹3,00,000
Yes	Yes
Yes	Yes
Yes	Yes
Up to Sum Insured	Up to Sum Insured
-	Yes

Age/Sum Insured	Sum Insured up to 5 Lac	Sum Insured 7 Lac & 10 Lac	Sum Insured above 10 Lac
6 years to 18 years	-	-	Yes
19 years to 45 years	-	Yes	Yes
46 years and above	Yes	Yes	Yes

What is not covered?

- Any pre-existing ailment/injury that was diagnosed/acquired within 48 months prior to issuance of the first policy
- Any diseases contracted during first 30 days of the policy start date except those arising out of accidents
- Non-allopathic treatment
- Expenses attributable to self-inflicted injury (resulting from suicide, attempted suicide)
- Expenses arising out of or attributable to alcohol or drug use/misuse/abuse
- Cost of spectacles/contact lenses, dental treatment
- Medical expenses incurred for treatment of AIDS
- Treatment arising from or traceable to pregnancy and childbirth, miscarriage, abortion and its consequences
- Congenital disease
- Tests and treatment relating to infertility and in vitro fertilisation

Remember, there are some treatments such as non-infective arthritis, joint replacement etc., which are covered only after completion of 2 consecutive policy years.

For a detailed set of exclusions, please log on to www.religarehealthinsurance.com.

Policy Terms

Minimum entry age	91 days
Maximum age	No age bar
Renewal	Lifelong Renewability, The Policy can be renewed under the then prevailing Health Insurance Product or its nearest substitute approved by IRDA.
Renewal premium	Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA.
Co-payment (SI 5 Lac & above)	If you enroll at the age of 61 years or more, you will have to pay 20% of the claim amount under the policy. We pay the rest.
Waiting period	30 days for any illness except injury
Waiting period for pre-existing illnesses	Four years of continuous coverage
Change in sum insured	You can enhance your sum insured under the policy only upon renewal
Grace period	30 days from the date of expiry to renew the policy

About Us

Religare Health Insurance Company Limited

Religare Health Insurance is focused on the delivery of health insurance services. Our promoter's expertise in the spectrum of financial services, healthcare delivery and preventive health solutions, coupled with a robust distribution model, offers us a unique edge to deliver and excel in a business environment that hinges on serviceability and scale. Powered by the best-in-class product design and a customer-centric approach, Religare Health Insurance is committed to delivering on its innate values of being a responsible, trustworthy and innovative health insurer.

The shareholders of Religare Health Insurance comprise of three strong entities - Religare Enterprises Limited, Union Bank of India and Corporation Bank.

Religare Enterprises Limited

Religare Enterprises Limited (REL), a leading emerging markets financial services group anchored in India, offers a wide array of services including broking, insurance, asset management, lending solutions, investment banking and wealth management. With a network that spans across over 1650 locations, and more than a million clients, REL enjoys a dominant presence in the Indian financial services space.

We have also built an Asia and emerging markets-focused Institutional Equities & Investment Banking business and a multi-boutique global asset management platform to tap the broader opportunities offered by the most promising emerging markets around the world.

Union Bank of India

Union Bank of India, a key player in India's public sector banking domain, operates out of over 3500 branches across the country and has a clientele base of more than 24 million. Over the past 90 years, the bank has played a proactive role in infusing cross-sector economic growth in India and has sustained a robust income mechanism from a well-diversified portfolio of assets.

Corporation Bank

Corporation Bank, a leading public sector bank, delivers its core objectives of sustainably maintaining the highest standards of service to its customers with innovative product & process solutions, through its formidable network of 1707 branches. The Bank has committedly worked towards empowering the rural and urban population alike, and has resultantly been a significant contributor to the economic growth impetus of the nation.

REACH US



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visit us at www.religarehealthinsurance.com



visit your nearest branch



Religare Health Insurance Company Limited

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Disclaimer: This is only a summary of product *carē*. For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale. Please seek the advice of your insurance advisor if you require any further information or clarification.

Statutory Warning: Prohibition of Rebates (under section 41 of Insurance Act, 1938): No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property, in India any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurers. Any person making default in complying with the provision of this section shall be punished with fine, which may extend to five hundred rupees.

Insurance is a subject matter of solicitation.

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